FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1 ORGANIZATION												
		(See instructions)					Office use only					
NAME OF COMMITTEE (in	ı full)	(Check if name is changed)		nple: If typying, the lines	type	12FE	4M5	1 1				
MADISON PR	OJECT INC.										ш	
					Ш				ш		ш	
ADDRESS (number and	d street)	BOX 66128									لب	
X (Check if add is changed)		HINGTON				DC	L	20	0035	612	 28	
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committee's e-m/												
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COMMITTEE'S WEE	B PAGE ADDRESS (U	RL)										
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COMMITTEE'S FAX 3202159596	NUMBER	Ь										
2. DATE M	M / D D / Y	2008										
3. FEC IDENTIFIC	ATION NUMBER	C	C00	298000								
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)												
I certify that I have exan	nined this Statement and	to the best of my know	rledge an	d belief it is true,	correct and	d complete	Э					
Type or Print Name o	f Treasurer	SCOTT B MACKE	NZIE									
Signature of Treasure	er Electronically File	d by SCOTT B N	IACKE	NZIE		Date	0 7	/ D	1 4	Y Y	0 [°] 0 8	
NOTE: Submission of f	alse, erroneous, or incom	nplete information may							.S.C. S43	37g.		
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